

**Tennessee Department of Environment & Conservation  
Division of Solid Waste Management**

**SOLID WASTE  
PART I APPLICATION PACKAGE**

This package contains two different applications that must be submitted to the TN Department of Environment & Conservation when an applicant pursues a Solid Waste Disposal Facility Permit:

- 1. The Solid Waste Part I Application and accompanying instructions.** (The application is to be sent to the appropriate Solid Waste Management Environmental Field Office (EFO) ([www.tdec.net/efo](http://www.tdec.net/efo)) for review.) ; **and**
- 2. The Solid Waste Management Application/Processing Fee form and accompanying instructions.** Submit this form with the appropriate fee to:

TN Department of Environment & Conservation  
Division of Fiscal Services  
Fee Collection Section – SWM  
14<sup>th</sup> Floor L & C Tower  
401 Church Street  
Nashville, TN 37243

**The applicant should contact the Division of Solid Waste Management EFO (see above website) before submitting the Part I application to insure the applicant understands all the information that must be submitted with the Part I application and to answer any questions concerning the package.**

**SOLID WASTE PART I APPLICATION**Tennessee Department of Environment and Conservation  
Division of Solid Waste Management

<b>1. a. Facility's full, legal name</b>		<b>Official use only</b>	
<b>b. Mailing address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>2. a. Physical location or address of facility</b>		<b>County</b>	
<b>b. Latitude (degrees, minutes, and seconds)</b>		<b>Longitude (degrees, minutes, and seconds)</b>	
<b>3. Responsible official's name</b>		<b>Phone number with area code</b> (       )	
<b>4. Manager's or Operator's name</b>		<b>Phone number with area code</b> (       )	
<b>5. a. Landowner's name</b>		<b>Phone number with area code</b> (       )	
<b>b. Mailing address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>6. a. Zoning authority's name *</b>	<b>Current zoning status</b>	<b>Phone number with area code</b> (       )	
<small>*see instruction on back</small>			
<b>b. Mailing address</b>	<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>7. Type of facility:</b> <input type="checkbox"/> Class I <input type="checkbox"/> Class II <input type="checkbox"/> Class III <input type="checkbox"/> Class IV <input type="checkbox"/> Class V <input type="checkbox"/> Class VI <input type="checkbox"/> Compost			
<b>8. Site acreage</b>	<b>Fill acreage</b>		
<b>9. Type(s) of waste handled:</b> <input type="checkbox"/> Municipal <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial <input type="checkbox"/> Demolition <input type="checkbox"/> Medical <input type="checkbox"/> Yard waste <input type="checkbox"/> Other _____			
<b>10. Amount of waste handled:</b> Weight _____ tons/day                      Volume _____ cubic yards/day			
<b>11. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information.</b>			
Date _____		Signature of Responsible Official _____	
		Official Title _____	
		Signature of Notary _____	
(Notary Seal)		Date Commission Expires _____	
<hr/>			
<b>12. Date</b> _____		Signature of Landowner _____	

## INSTRUCTIONS FOR SOLID WASTE PART I APPLICATION

Complete this form for each facility that is disposing or composting solid waste in Tennessee. If multiple facilities exist or are planned, describe each facility and its wastes on a separate form. **Submit completed documents to the respective field office in your area.**

Facilities beginning operation after the effective date of this rulemaking, must submit this form along with the required information [1200-1-7-.02(2)(d)].

- Line 1 a. **Facility's full, legal name** - Give the applicant's full, legal name for this site to distinguish it from any other site the applicant or organization may own or operate in Tennessee. **Identification Number** - leave blank for Division usage.
- b. **Mailing address** - Give a complete mailing address for applicant or organization.
- Line 2 a. **Physical location or address of facility** - Give information which will aid the Division in going to the site/facility. Do not give a Post Office Box Number.
- b. Supply the latitude and longitude of the site with the precision of degrees, minutes and seconds. **Latitude** and **longitude** may be found by using a U. S. Geological Survey quadrangle map.
- Line 3 **Responsible official's name** - Give the name and phone number of the person who the Division may contact for further information about the contents of this form.
- Line 4 **Manager's or Operator's name** - Give the name and phone number of the manager or person who is responsible for the direction of activities at the site/facility.
- Line 5 a. **Landowner's name** - Give the person(s) or organization name(s) and phone number(s) of the immediate owner(s) of the property [attached letter from landowner(s) as required by Rule 1200-1-7-.02(2)(d)1.(iv)].
- b. **Mailing address** - Give a complete mailing address for landowner.
- Line 6 a. **Zoning authority's name** - Give the name and phone number of the zoning authority plus the current zoning status of the property. Also, attach a statement whether this facility is subject to local approval as provided at TCA 68-211-701 (the Jackson Law) and a statement whether the facility is subject to a solid waste regional approval as provided at TCA 68-211-814(b)(1)(D). If such local approval is required, demonstration of that approval should be attached.
- b. **Mailing address** - Give a complete mailing address for the zoning authority.
- Line 7 **Type of facility** - Check the type of facility to be operated at this site.
- Line 8 **Site acreage** - Give total acreage of the property.
- Fill acreage** - Give the acreage within the proposed fill area (footprint).
- Line 9 **Type(s) of waste handled** - Check the type(s) of waste to be handled at the facility. If the waste type is not listed, check "other" and briefly describe the source or characteristics of the solid waste.
- Line 10 **Amount of waste handled** - Provide an estimate of the daily weight in tons/day and/or volume in cubic yards/day that will be handled at the facility.
- Line 11 **Certification** - After all documents have been compiled for submission to the Division, the manager or owner responsible for the site must sign, date and give title. This signature must be notarized.
- Line 12 **Date** - The landowner must sign and date the application.



## INSTRUCTIONS FOR APPLICATION FILING/PROCESSING FEE

1. Enter full name of facility, mailing address, and zip code.
2. Enter the permittee's name (person/legal entity to whom permit will be issued), mailing address, zip code, and telephone number complete with area code in this block.
3. Enter the physical location with directions to the proposed facility (not a post office box or mailing address) in this space.
4. Mark the appropriate checkbox to indicate if the application is for a disposal facility, a processing facility, a transfer facility, a major modification, or a transfer of ownership for an existing facility. If the application is for a disposal operation, also mark the appropriate checkbox to indicate the classification of the facility being proposed. For class I and class II facilities, indicate whether the payment is being made for the hydrogeologic report (\$4000.00) or the construction plan review (\$6,000.00). Transfers of ownership apply to all facility types.
5. If this facility is a landfill (any class), enter the number of total permitted site acres, regardless of whether the entire site will be a part of the operational area.
6. Enter the amount of the fee you are enclosing. The correct amount can be determined by referring to item (4) of the form. To the right of the facility type is the amount of the fee due for that type of application (example: a Class III disposal facility has a \$3,000.00 fee).
7. Enter the total area in the landfill footprint here, if applicable.
8. If application is for a processing facility, enter the type and size (example: incinerator-- 25 tons/day capacity).
9. The owner or an authorized officer of the company must print their name and title before signing and dating the certification.

Note:

Please make checks payable to State of Tennessee, Division of Solid Waste Management.

Mail check and the completed form to: State of Tennessee, Department of Environment and Conservation, Division of Fiscal Services – Fee Section – SWM, 401 Church Street, 14<sup>th</sup> Floor Tower, Nashville, TN 37243.

"TIMELY ACTION" TIMING STARTS WITH THE RECEIPT OF YOUR CHECK AND THE COMPLETED FORM IN THE CENTRAL OFFICE AND THE RECEIPT OF ALL NECESSARY MATERIALS FOR THE REVIEW IN THE FIELD OFFICE.